

CLAIMS ONLY

Application Number
1A/523230

Filing Date

Applicant(s)	
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* May be used for additional claims or amendments .

CLAIMS		AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT	
		Indep	Depend	Indep	Depend	Indep	Depend
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Total Indep	1						
Total Depend	20						
Total Claims	21						

May be used for additional claims or amendments

	Indep	Depend	Indep	Depend	Indep	Depend
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